PART B - FEE(S) TRANSMITTAL 11-17-05								
Complete and this form, together with applicable fee(s), to: Mail					l Stop ISSUE amissioner fo . Box 1450	FEE		
1-0 2005	1		or <u>I</u>	Fax (571	273-2885			
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Wendy W. Koba PO Box 556					Cer by certify that th	tificate of Mailing or Tran	smission ag deposited with the United	
Springtown, PA 18081					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
11/18/2005 MAHMED2 00000059 10820356					endu W	10 (5/1) 2/3-2885, on the	(Depositor's name)	
01 FC:2501 700.00 OP					(1)01/8/1	(1) Kolia	(Signature)	
02 FC:1504 03 FC:8001	300.00 OP 6.00 OP				1/16/	05	(Date)	
APPLICATION NO.	FILING DATE		DINVENTOR	7	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/820,356	04/08/2004	, · · · · · · · · · · · · · · · · · ·				SIO-0108	8115	
TITLE OF INVENTION: METHOD OF USING A MANHATTAN LAYOUT TO REALIZE NON-MANHATTAN SHAPED OPTICAL STRUCTURES								
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICA	ATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$	300	\$1000	11/18/2005	
EXAMINER		ART UNIT		CLASS-S	UBCLASS			
SIEK, VUTHE		2825		716-0	008000			
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
SiOptical, Inc. Allentown PA 18195								
Please check the appropriate assignee category or categories (will not be printed on the patent):								
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):								
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